Exhibit B

UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF OHIO
EASTERN DIVISION

IN RE: NATIONAL PRESCRIPTION OPIATE LITIGATION ***APPLIES TO ALL CASES***	**Case No. 1:17-MD-2804** **Hon. Dan A. Polster**

DEFENDANT FACT SHEET

Please provide the information below for each Defendant. In answering these questions, please use the following definitions:

"You" or "Your" means the Defendant Family responding to this fact sheet. For purposes of this Fact Sheet, "Defendant Family" consists of all corporate affiliates, subsidiaries, and related entities that are named as a Defendant in any action that is part of this MDL.

For purposes of this fact sheet, "Prescription Opioid Products" refers to the medications covered by DEA's ARCOS production: oxycodone, hydromorphone, fentanyl, and hydrocodone.

1. Identify the name, address and DEA registration number of each of Your distribution centers in the United States from January 1, 2008 to the present to the extent that information is reasonably available.

2. For each DEA registration number identified in your response to No. 1, identify the following information to the extent that information is reasonably available:

DEA Registration Number	DEA Registrant (legal entity holding the registration)	Domicile State	Home Office Location

3. For each DEA registration number identified in response to No. 2, above, please provide the locations for each distribution center that is operated under each DEA Registration Number from January 1, 2008 to present to the extent that information is reasonably available. If the information has changed over time please indicate when those changes occurred.

DEA Registration Number	Location #1	Location #2	Location #3	Location #4

4. Please provide a description or information sufficient to show the corporate structure that contains each of the current DEA Registrants identified in Your response to No. 2, above for the time period January 1, 2008 to present. If there have been changes in the corporate structure during this timeframe specify or provide information sufficient to show the structural change(s) and when they occurred. This request can be satisfied by providing organizational chart(s) containing the entities identified in Your Response to No. 2 above for the requested time period.

5. Please identify the officers and directors of each current DEA Registrant identified in Your Response to No. 2 above, as well as their title.

6. For each Prescription Opioid Product You manufactured and/or distributed from January 1, 2008 to present, provide the following information to the extent reasonably available:

Proprietary Name/Established USAN Name	NDC #	NDA #	Dosage Forms/Strength	Date of First Manufacture or Distribution, as applicable	Date on Which You Stopped Manufacture or Distribution, as applicable